

Effective Identification of Substance Use Disorders

- Recognize prevalence of problem
- Drop stereotypes
- Always screen for disorders
- Corroborate results

M.A.S.T.
Michigan Alcoholism Screening Test

- 25 item self administered questionnaire
- Self-report of alcohol (and perhaps drug) problems
- Paper and pencil test
- Helpful, but not diagnostic

CAGE - AID

- Have you felt you ought to *Cut* down on your alcohol and drug use?
- Have people *Annoyed* you by criticizing your drinking or drug use?
- Have you ever felt bad or *Guilty* about your drinking or drug use?
- Have you ever had a drink or used drugs first thing in the morning to steady your nerves or to get rid of a hangover (*Eye-opener*)?

(Brown, R.L., & Rounds, L. A. (1995). Conjoint screening questionnaires for alcohol and other drug abuse: Criterion validity in a primary care practice. *Wisconsin Medical Journal*, 94, 135-140)

Sharing the Diagnosis (Confrontation or Intervention)

- Give specific findings
- Remember patient is responsible
- Watch for signs of denial
- Repeat as needed

*Detoxification
for
Depressants, Stimulants, and Opiates*

- Physical Exam
- Educate, Reassure
- Vitamins, etc.
- Meds?

Rehabilitation

for

Substance-Use Disorders

- Use best data
- Establish realistic goals
- Change is the patient's responsibility
- Use all available resources
- Agree on goals

Optimize Levels Of Physical Functioning

- Careful physical examination
- Appropriate detoxification procedures when needed
- Efforts to reverse physical pathology

Maximize Motivation For Abstinence

- Lectures
- Discussion groups with patients
- Discussion groups with family members
- Using counselors in recovery
- Self-help groups

Rebuild A Life Without Substances

Substances have been a very important part of life and are very difficult to give up

Lectures and discussion groups to talk about issues

- appropriate use of free time
- interaction with relatives and friends now that you are sober
- appropriate interaction with or avoidance substance-using friends
- saying no to substances when offered (refusal skills)

Relapse Prevention

- Avoid high risk situations
- Anticipate minor relapses
- Recovering from relapses
- Identifiy triggers

Type of Treatment

Inpatient
vs.
Outpatient

Possible Medications for Alcohol Rehabilitation

- Disulfiram
- Naltrexone
- Serotonin re-uptake inhibitors
- Acamprosate

Possible Medications for Stimulant Rehabilitation

None shown to be effective

Possible Medications for Opiate Rehabilitation

Methadone

Naltrexone

Aftercare

- Lessons learned can be reinforced
- Provides opportunity to apply knowledge to everyday situations